



· 疾病控制 ·

儿童青少年脊柱侧弯的影响因素研究

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摘要: 目的 了解浙江省嘉兴市中小学生脊柱侧弯发生情况, 并分析其影响因素, 为儿童青少年脊柱侧弯防控提供依据。方法 于2019年采用分层整群抽样方法, 选择嘉兴市小学四~六年级和初中一~三年级学生为调查对象, 通过问卷调查收集人口学信息、饮食习惯、体力活动、学习环境和习惯等资料; 采用直立位全脊柱X线摄片筛查脊柱侧弯; 采用多因素logistic回归模型分析脊柱侧弯的影响因素。结果 调查2 568人, 其中男生1 352人, 占52.65%; 女生1 216人, 占47.35%。小学1 335人, 占51.99%; 初中1 233人, 占48.01%。检出脊柱侧弯93例, 脊柱侧弯率为3.62%。多因素logistic回归分析结果显示, 年龄($OR=0.826$, 95%CI: 0.710~0.960)、性别($OR=2.079$, 95%CI: 1.343~3.221)和过去7 d有重体力活动($OR=2.514$, 95%CI: 1.248~5.063)是中小学生脊柱侧弯的影响因素。结论 嘉兴市中小学生脊柱侧弯率较高, 年龄、性别和体力活动可能影响儿童青少年脊柱侧弯的发生。建议将脊柱侧弯筛查纳入中小学生常规体检。

关键词: 脊柱侧弯; 影响因素; 儿童; 青少年

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Factors affecting scoliosis among children and adolescents

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Abstract: Objective To investigate the prevalence of scoliosis and identify the influencing factors among children and adolescents in Jiaxing City, Zhejiang Province, so as to provide insights into the management of scoliosis among children and adolescents. **Methods** The fourth, fifth and sixth grade primary school students and the first, second and third grade junior high school students were selected using the stratified cluster sampling method in Jiaxing City in 2019. Students' demographic features, diet habits, physical activity and learning environments and habits were collected using questionnaire surveys. Scoliosis was screened using whole-spine X-ray scans in an upright position, and the factors affecting scoliosis were identified using multivariable logistic regression analysis. **Results** Valid surveys were completed among 2 568 students, including 1 352 boys (52.65%) and 1 216 girls (47.35%), and there were 1 335 primary school students (51.99%) and 1 233 junior high school students (48.01%). A total of 93 students were detected with scoliosis, with a prevalence rate of 3.62%. Multivariable logistic regression analysis identified age ($OR=0.826$, 95%CI: 0.710~0.960), gender ($OR=2.079$, 95%CI: 1.343~3.221) and vigorous physical activity in the past 7 days ($OR=2.514$, 95%CI: 1.248~5.063) as factors affecting scoliosis among primary and junior high school students. **Conclusions** The prevalence of scoliosis is high among primary and junior high school students in Jiaxing City. Age, gender and physical activity may affect the risk of scoliosis. Scoliosis screening is recommended to be included in routine healthy examinations among primary and middle school students.

Keywords: scoliosis; influencing factor; child; adolescent

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脊柱侧弯是儿童青少年最常见的肌肉骨骼健康问题。胸廓曲线过大且未经治疗可导致肺功能下降和呼吸短促^[1],严重影响儿童青少年生长发育。目前,脊柱侧弯的病因尚不清楚,可能与遗传、激素水平、运动和习惯性姿势有关^[2]。脊柱侧弯发生后仅能通过支架和脊柱外科手术控制疾病进展,因此应重视脊柱侧弯的早期筛查。直立位全脊柱X线摄片获得的Cobb角是诊断脊柱侧弯的“金标准”^[3]。健康体检中也常采用躯干旋转角度评估躯干异常^[4]。中小学生学习负担较重,长期不正确的读写姿势和背书包习惯导致两侧肩膀用力不均,可造成脊柱损伤,引发脊柱侧弯。本研究调查浙江省嘉兴市中小学生脊柱侧弯情况,并分析其影响因素,为儿童青少年脊柱侧弯早期防控提供依据。

1 对象与方法

1.1 对象 于2019年采用分层整群抽样方法,从嘉兴市城市和农村分别各抽取1所小学和1所初中,选择抽中学校的小学四~六年级和初中一~三年级学生为调查对象。本研究通过浙江省疾病预防控制中心伦理委员会审查,审批号:T-043-R20180515,调查对象及其家长均签署知情同意书。

1.2 方法

1.2.1 问卷调查 采用自行设计的问卷收集:(1)人口学信息,年龄、性别、居住地等;(2)饮食习惯,过去7d含糖饮料、甜食、油炸食品、新鲜水果、新鲜蔬菜和早餐的摄入频率;(3)体力活动,过去7d中等体力活动、重体力活动和步行频率;(4)学习环境和习惯,学校和家庭的学习环境、日常阅读和写作习惯。参考国际体力活动量表,重体力活动指需花费较多体力完成,呼吸较平常明显增强的活动;中等体力活动指需花费中等体力完成,呼吸较平常稍微增强的活动。

1.2.2 体格检查 测量身高和体重。参考GB/T 16133—2014《儿童青少年脊柱弯曲异常的筛查》^[5],以躯干旋转角度≥5°或一般检查前屈试验异常的学生转诊至医院,行直立位全脊柱X线摄片检查,Cobb角>10°判定为脊柱侧弯。

1.3 统计分析 采用SAS 9.2软件统计分析。定量资料服从正态分布的采用均数±标准差($\bar{x}\pm s$)描述,不服从正态分布的采用中位数和四分位数间距 [$M (Q_R)$] 描述,组间比较采用t检验和Mann-Whitney U检验。定性资料采用相对数描述,组间比较采用 χ^2 检验。采用多因素logistic回归模

型分析脊柱侧弯的影响因素。以 $P<0.05$ 为差异有统计学意义。

2 结 果

2.1 基本情况 调查2 568人,其中男生1 352人,占52.65%;女生1 216人,占47.35%。城市1 277人,占49.73%;农村1 291人,占50.27%。小学1 335人,占51.99%;初中1 233人,占48.01%。

2.2 脊柱侧弯检出情况 检出脊柱侧弯93例,脊柱侧弯率为3.62%。女生脊柱侧弯率高于男生($P<0.05$)。过去7d有重体力活动的学生脊柱侧弯率高于无重体力活动的学生($P<0.05$)。不同年级学生脊柱侧弯率比较,差异有统计学意义($P<0.05$),其中小学四年级和初一学生脊柱侧弯率较高。读写时眼睛距书本超过1尺(1 m=3 尺)的频率不同的学生脊柱侧弯率比较,差异有统计学意义($P<0.05$)。见表1。

脊柱侧弯学生的年龄 $M (Q_R)$ 为11(2)岁,身高为 (150.73 ± 11.35) cm,体重为 (42.70 ± 12.02) kg;无脊柱侧弯学生的年龄为12(3)岁,身高为 (152.42 ± 11.55) cm,体重为 (45.26 ± 12.03) kg。脊柱侧弯学生的年龄和体重均低于无脊柱侧弯学生($Z=-2.782, P=0.005; t=-2.012, P=0.044$)。

2.3 脊柱侧弯影响因素的多因素 logistic 回归分析 以脊柱侧弯为因变量(0=否,1=是),以单因素分析中 $P<0.1$ 的因素(因年龄和年级相关,为避免多重共线性,仅纳入年龄)为自变量,进行多因素logistic回归分析。进一步采用后退法拟合模型,对结果中 $P>0.05$ 的自变量按 P 值由大到小逐个排除。结果显示,性别、年龄和过去7d有重体力活动与脊柱侧弯有统计学关联。见表2。

3 讨 论

本次调查2 568名嘉兴市中小学生,脊柱侧弯率为3.62%,高于全球儿童青少年脊柱侧弯率(1%~3%)^[6]和2015年我国调查结果(1.02%)^[7]。

脊柱侧弯在青少年骨骼发育成熟前进展最快。本次调查结果显示,脊柱侧弯发生风险随年龄增长降低,提示应重视低年龄学生的脊柱侧弯筛查。女生脊柱侧弯发生风险高于男生,与科索沃的一项研究结果^[8]一致。FRERICHI等^[9]研究发现,11~12岁和13~14岁女生脊柱侧弯率分别是同年龄段男生的6.5倍和3.3倍。女生脊柱侧弯率较高,可能与体内瘦素水平有关,瘦素在调节能量消耗、体重和骨代谢方面

表 1 脊柱侧弯影响因素的单因素分析 [n (%)]

Table 1 Univariable analysis of influencing factors for scoliosis [*n* (%)]

项目 Item	调查	脊柱侧 弯例数	脊柱侧 弯率	χ^2 值	P 值	项目 Item	调查	脊柱侧 弯例数	脊柱侧 弯率	χ^2 值	P 值
	人数						人数				
	Respondents	Scoliosis cases	rate/%				Respondents	Scoliosis cases	rate/%		
居住地 Residence				0.136	0.712	否 No		498	9	2.38	
城市 Urban area	1 277	44	3.44			过去 7 d 课堂开灯情况 Classroom lighting in the past 7 days				0.447	0.800
农村 Rural area	1 291	49	3.80			不开 No		82	4	4.88	
性别 Gender				11.403	0.001	不用投影时开 The light was on without projection	1 581	58	3.67		
男 Male	1 352	33	2.44			仅阴天开 The light was on in cloudy days	905	31	3.43		
女 Female	1 216	60	4.93								
年级 Grade				14.910	0.011	调整课桌椅高度频率 Frequency of adjusting the height of desks and chairs				3.256	0.354
四年级 Fourth	431	26	6.03			从不 Never	1 714	68	3.97		
五年级 Fifth	451	14	3.10			2~3 个月 1 次 Once every 2~3 months	243	10	4.12		
六年级 Sixth	453	16	3.53			每学期 1 次 Once per semester	376	10	2.66		
初一年级 First	444	21	4.73			每年 1 次 Once a year	235	5	2.13		
初二年级 Second	409	9	2.20			家长限制运动时间 Parents limit the exercise time				1.180	0.554
初三年级 Third	380	7	1.84			经常 Always	281	10	3.56		
家庭成员脊柱异常 Family history of scoliosis				0.003	0.953	有时 Sometimes	902	28	3.10		
是 Yes	121	5	4.13			从不 Never	1 385	55	3.97		
否 No	2 447	88	3.60								
过去 7 d 含糖饮料饮用频率 Frequency of sugary drinks intake in the past 7 days				0.798	0.671	家长限制使用电子产品 Parents restrict the use of electronic products				0.155	0.694
0	309	14	4.53			是 Yes	1 944	72	3.70		
<1 次/d	2 124	74	3.48			否 No	624	21	3.37		
≥1 次/d	135	5	3.70			读写时胸口距桌子边沿超过 1 拳 Keep chest more than one punch from the edge of table when reading and writing				0.949	0.400
过去 7 d 甜食摄入频率 Frequency of sweets intake in the past 7 days				0.500	0.779	从不 Never	265	10	3.77		
0	145	4	2.76			偶尔 Occasionally	1 206	47	3.90		
<1 次/d	2 076	75	3.61			经常 Often	785	30	3.82		
≥1 次/d	347	14	4.03			总是 Always	312	6	1.92		
过去 7 d 油炸食品摄入频率 Frequency of fried food intake in the past 7 days				0.845	0.656	读写时眼睛距书本超过 1 尺 Keep eyes more than 33 cm from book when reading and writing				8.888	0.031
0	212	10	4.72			从不 Never	268	14	5.22		
<1 次/d	2 200	77	3.50			偶尔 Occasionally	1 326	39	2.94		
≥1 次/d	156	6	3.85			经常 Often	720	35	4.86		
过去 7 d 新鲜水果摄入频率 Frequency of fruit intake in the past 7 days				2.197	0.532	总是 always	254	5	1.97		
0	17	0	0			读写时手指距笔尖 1 寸 Keep fingers one inch from the tip of pen when reading and writing				2.306	0.511
<1 次/d	620	19	3.06			从不 Never	481	22	4.57		

表 1(续) Table 1 (continued)

项目 Item	调查				调查				χ^2 值	P值
	人数	脊柱侧弯例数	脊柱侧弯率	χ^2 值	P值	人数	脊柱侧弯例数	脊柱侧弯率		
	Respon- dents	Scoliosis cases	rate/%			Respon- dents	Scoliosis cases	rate/%		
1次/d	1 348	53	3.93			偶尔 Occasionally	913	34	3.72	
≥2次/d	583	21	3.60	2.327	0.507	经常 Often	644	22	3.42	
过去 7 d 新鲜蔬菜摄入频率 Frequency of vegetable intake in the past 7 days						总是 Always	530	15	2.83	
0	110	4	3.64			在阳光直射下看书或电子屏幕 Reading books or watching the screens in direct sunlight			3.984	0.263
<1次/d	332	17	5.12			从不 Never	1 272	52	4.09	
1次/d	921	30	3.26			偶尔 Occasionally	1 109	33	2.98	
≥2次/d	1 205	42	3.49	1.861	0.394	经常 Often	128	7	5.47	
过去 7 d 吃早餐频率 Frequency of breakfast in the past 7 days						总是 Always	59	1	1.69	
每天 Everyday	2 188	82	3.75			躺着或趴着看书或电子屏幕 Lying reading books or watching screens			3.113	0.375
有时 Sometimes	361	11	3.05			从不 Never	645	20	3.10	
从来不吃 Never	19	0	0			偶尔 Occasionally	1 305	53	4.06	
过去 7 d 有重体力活动 Vigorous physical activity in the past 7 days				5.199	0.023	经常 Often	504	14	2.78	
是 Yes	2 070	84	4.06			总是 Always	114	6	5.26	
否 No	498	9	1.81			过去 7 d 户外活动时间 Outdoor activities in the past 7 days/h			5.451	0.244
过去 7 d 有中等体力活动 Vigorous physical activity in the past 7 days				0.843	0.359	<1	784	33	4.21	
是 Yes	1 469	58	3.95			1~	1 034	37	3.58	
否 No	1 099	35	3.18	1.954	0.162	2~	358	7	1.96	
过去 7 d 步行至少 10 min/d Walking 10 min/d at least in the past 7 days						3	268	9	3.36	
是 Yes	2 070	84	3.84			不确定 Uncertain	124	7	5.65	

表 2 脊柱侧弯影响因素的多因素 logistic 回归分析

Table 2 Multivariable logistic regression analysis of influencing factors for scoliosis

变量 Variable	参照组 Reference	β	$s_{\bar{x}}$	Wald χ^2 值	P值	OR 值	95%CI
年龄 Age		-0.192	0.077	6.191	0.013	0.826	0.710~0.960
性别 Gender							
女 Female	男 Male	0.732	0.223	10.757	0.001	2.079	1.343~3.221
过去 7 d 有重体力活动 Vigorous physical activity in the past 7 days							
是 Yes	否 No	0.922	0.357	6.657	0.010	2.514	1.248~5.063
常量 Constant		-2.979	0.834	12.766	0.001	0.051	

起重要作用；也可能与沿脊柱凹侧和凸侧的椎旁肌力量不平衡有关^[10]。建议将脊柱侧弯筛查纳入中小学卫生保健工作中，在资源有限地区可优先开展女生

脊柱侧弯筛查。

既往研究发现，低体重与脊柱畸形和特发性脊柱侧弯密切相关^[11]。本次调查结果显示，脊柱侧弯学



生的体重低于无脊柱侧弯学生，但多因素分析未发现体重与脊柱侧弯的统计学关联。考虑与不同年龄、性别学生的体重参考标准不同有关。保持正常的体重对儿童青少年预防脊柱侧弯仍具有重要意义。

体力活动对脊柱侧弯影响的研究结论^[12-13]尚不一致。本次调查结果显示，过去7d有重体力活动的学生脊柱侧弯风险较高，可能与脊柱负荷不平衡，骨骼肌疲劳有关^[14]。运动干预可以恢复肌肉骨骼功能，防治或延缓脊柱侧弯的加重^[15]，提示应重视体力活动强度对中小学生脊柱侧弯的影响。

本次调查采用 Cobb 角判断脊柱侧弯，因筛查的灵敏度并不能达到 100%，可能存在部分漏诊病例，导致错分偏倚。

参考文献

- [1] WEINSTEIN S L. The natural history of adolescent idiopathic scoliosis [J]. J Pediatr Orthop, 2019, 39 (Suppl.1): S44-S46.
- [2] ÁGUSTSSON A, SVEINSSON T, POPE P, et al. Preferred posture in lying and its association with scoliosis and windswept hips in adults with cerebral palsy [J]. Disabil Rehabil, 2019, 41 (26): 3198-3202.
- [3] BUNNELL W P. Outcome of spinal screening [J]. Spine, 1993, 18 (12): 1572-1580.
- [4] NEGRINI S, DONZELLI S, AULISA A G, et al. 2016 SOSORT guidelines: orthopaedic and rehabilitation treatment of idiopathic scoliosis during growth [J/OL]. Scoliosis Spinal Disord, 2018, 13 (2018-01-10) [2022-01-27]. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5795289>. DOI: 10.1186/s13013-017-0145-8.
- [5] 中华人民共和国国家卫生和计划生育委员会, 中国国家标准化管理委员会. 儿童青少年脊柱弯曲异常的筛查: GB/T 16133—2014 [S]. 2014.
- National Health and Family Planning Commission of the People's Republic of China, Standardization Administration of the People's Republic of China. Screening of spinal curvature abnormality of children and adolescents: GB/T 16133—2014 [S]. 2014.
- [6] WEINSTEIN S L, DOLAN L A, CHENG J C Y, et al. Adolescent idiopathic scoliosis [J]. Lancet, 2008, 371 (9623): 1527-1537.
- [7] ZHANG H Q, GUO C F, TANG M X, et al. Prevalence of scoliosis among primary and middle school students in Mainland China: a systematic review and meta-analysis [J]. Spine, 2015, 40 (1): 41-49.
- [8] TAHIRBEGOLLI B, OBERTINCA R, BVTYQI A, et al. Factors affecting the prevalence of idiopathic scoliosis among children aged 8-15 years in Prishtina, Kosovo [J/OL]. Sci Rep, 2021, 11 (1) (2021-08-18) [2022-01-27]. <https://doi.org/10.1038/s41598-021-96398-1>.
- [9] FRERICH J M, HERTZLER K, KNOTT P, et al. Comparison of radiographic and surface topography measurements in adolescents with idiopathic scoliosis [J]. Open Orthop J, 2012, 6: 261-265.
- [10] ZHENG Y, DANG Y N, WU X J, et al. Epidemiological study of adolescent idiopathic scoliosis in Eastern China [J]. J Rehabil Med, 2017, 49 (6): 512-519.
- [11] PORTELA-PINO I, LÓPEZ-CASTEDO A, MARTÍNEZ-PATIÑO M J, et al. Gender differences in motivation and barriers for the practice of physical exercise in adolescence [J/OL]. Int J Environ Res Public Health, 2019, 17 (1) (2019-12-25) [2022-01-27]. <https://doi.org/10.3390/ijerph17010168>.
- [12] WAKE M, CLIFFORD S A, PATTON G C, et al. Morbidity patterns among the underweight, overweight and obese between 2 and 18 years: population-based cross-sectional analyses [J]. Int J Obes, 2013, 37 (1): 86-93.
- [13] DE ASSIS S J C, SANCHIS G J B, DE SOUZA C G, et al. Influence of physical activity and postural habits in schoolchildren with scoliosis [J/OL]. Arch Public Health, 2021, 79 (1) (2021-09-29) [2022-01-27]. <https://doi.org/10.1186/s13690-021-00584-6>.
- [14] LAU R, CHEUK K Y, TAM E, et al. Feasibility and effects of 6-month home-based digitally supported E-Fit program utilizing high-intensity interval exercises in girls with adolescent idiopathic scoliosis: a randomized controlled pilot study [J]. Stud Health Technol Inform, 2021, 280: 195-198.
- [15] 邹艳, 林云, 章荣华, 等. 儿童青少年脊柱侧弯筛查和干预研究进展 [J]. 预防医学, 2019, 31 (10): 1017-1021.
- ZOU Y, LIN Y, ZHANG R H, et al. Research progress in screening and intervention of scoliosis among children and adolescents [J]. Prev Med, 2019, 31 (10): 1017-1021.

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